## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

Application or Docket Number

09/605010

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
FOR			NUMBE	RFILED	NUMBER	NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE				•				i i	345.00	OR		690.00
TOTAL CLAIMS			22 minus 20= * 2				X\$ 9=		OR	X\$18=	36,50	
INDEPENDENT CLAIMS				7 minus 3 = *				X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT								+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	226,00
CLAIMS AS AMENDED - PART II											OTHER THAN	
(Column 1)					(Column 2) (Column 3)			SMALL	ENTITY	OR	SMALL	YTITM
AMENDMENT A		REMA AF	AIMS AINING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDIN	Total	*		Minus	**	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	N OF M	Minus	***	=		X39=		OR	X78=	
	HIRST PHESE	NIAHO	N OF MU	JLTIPLE DEF	PENDENT CLAIM			+130=		OR	+260=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Colu	ımn 1)		(Column 2)	(Column 3)						
AMENDMENT B		REM/	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total			Minus	**	=		X\$ 9=		OR	X\$18=	
ME	Independent	*		Minus	救救市	=		X39=		OR	X78=	
€€	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UN	·	
								+130=		OR	+260=	
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
Ŀ			umn 1)	W	(Column 2)	(Column 3)	a					
AMENDMENT C		REM.	AIMS AINING TER IDMENT	on-	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	٠		Minus	**	=		X\$ 9= ·		OR	X\$18=	
	Independent	•		Minus .	***	=		X39=	V = 10	OR	X78=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.100			1060	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+260=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

## This Fore s for INTERNAL PTO SE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/605010

## Total Fee Calculation

					'		
	Fee Code	Total # Claims	Number Extra	x	Fee	Fee =	Total
	Sm./Lg.			<u></u>	Sm. Entity	Lg. Entity	10121
Basic Filing Fee	201/101						680,00
Total Claims >20	203/103	22 -20 =	2	Х	***************************************		- <u>3.6</u> ~0
Independent Claims >3	202/102	-} =	<del></del>	Д			
Mult. Dep Claim Present	204/104						
Surcharge	205/105					130,00 =	13000
English Translation	139						
TOTAL FEE CALCULA	ATION						856,00
Fees due upon filing t	he application.						
Total Filing Fees Due	= \$	856.00				•	
Less Filing Fees Subm	iiπed - \$			_			
BALANCE DUE	8	56,00		-			
Office of Initial Patent		······			·		